

STATEMENT OF
DR. LORIN E. KERR
UNITED MINE WORKERS OF AMERICA
BEFORE THE
COMMITTEE ON ENERGY AND COMMERCE
SUBCOMMITTEE ON HEALTH AND THE ENVIRONMENT

APRIL 3, 1981

MR. CHAIRMAN, MEMBERS OF THE SUBCOMMITTEE, I AM DR. LORIN E. KERR, DIRECTOR OF OCCUPATIONAL HEALTH FOR THE UNITED MINE WORKERS OF AMERICA. I APPRECIATE THIS OPPORTUNITY TO PRESENT OUR VIEWS ON THE NOMINATION OF DR. C. EVERETT KOOP TO THE POSITION OF SURGEON GENERAL OF THE UNITED STATES PUBLIC HEALTH SERVICE.

MR. CHAIRMAN, THE UMWA HAS GONE ON RECORD IN OPPOSITION TO THE NOMINATION OF DR. KOOP TO THIS VITAL PUBLIC HEALTH POSITION. WE BASE OUR OPPOSITION ON THE STRONG BELIEF THAT THE SURGEON GENERAL SHOULD HAVE AN EXTENSIVE BACKGROUND IN COMMUNITY HEALTH AND PREVENTIVE MEDICINE. IN FACT, SINCE 1935 EACH OF OUR SURGEONS GENERAL HAS HAD A STRONG PUBLIC HEALTH BACKGROUND. TO OUR KNOWLEDGE, DR. KOOP HAS NO EXPERIENCE OR TRAINING IN PREVENTIVE MEDICINE OR PUBLIC HEALTH.

WE BELIEVE THAT THE MOST IMPORTANT PUBLIC FUNCTION OF THE SURGEON GENERAL IS TO ADVISE AND EDUCATE THE NATION ON SUCH IMPORTANT PUBLIC HEALTH MATTERS AS ENVIRONMENTAL HEALTH HAZARDS, DIET AND NUTRITION AND SMOKING'S EFFECT ON HEALTH. ANOTHER VITAL FUNCTION IS TO ENCOURAGE AND ADVOCATE THE PREVENTIVE SIDE OF MEDICINE THROUGH IMMUNIZATION, SANITATION AND OTHER DISEASE PREVENTION MEASURES. ALTHOUGH DR. KOOP IS AN ACCOMPLISHED SURGEON AND PHYSICIAN, WE DO NOT BELIEVE THAT HIS TRAINING AND EXPERIENCE IN CLINICAL MEDICINE PREPARE HIM FOR THIS CRITICALLY IMPORTANT PUBLIC HEALTH ROLE.

CLINICAL MEDICINE CONSISTS BASICALLY OF THE TREATMENT OF PATIENTS AFTER THEY HAVE CONTRACTED A DISEASE. THE RELATIONSHIP IS TYPICALLY ONE-ON-ONE, WITH THE EMPHASIS ON TREATMENT. PUBLIC HEALTH PROFESSIONALS, ON THE OTHER HAND, DEAL WITH COMMUNITIES AND ENTIRE POPULATIONS. THE PRIMARY EMPHASIS IS THE PREVENTION OF DISEASE RATHER THAN TREATMENT. CONSEQUENTLY, PUBLIC HEALTH PROFESSIONALS AND CLINICAL PRACTITIONERS HAVE DIFFERENT APPROACHES TO MEDICINE AND OFTEN FOLLOW WIDELY DIVERGENT METHODS.

THE PUBLIC HEALTH PROFESSION ENCOMPASSES THE SKILLS OF PHYSICIANS, CHEMISTS, BIOLOGISTS, VIROLOGISTS, BACTERIOLOGISTS, ENVIRONMENTAL SCIENTISTS, NURSES, INDUSTRIAL HYGIENISTS, DIETITIANS AND PLANNERS. WHILE EACH OF THESE MAKES A VITAL CONTRIBUTION TO THE FIELD, ONLY THE PUBLIC HEALTH PROFESSIONAL HAS THE TRAINING AND EXPERIENCE THAT COVERS THE ENTIRE SPECTRUM OF COMMUNITY HEALTH. CLINICAL MEDICINE PLAYS AN IMPORTANT AND LIFE-GIVING ROLE BUT IS ONLY ONE PART OF PUBLIC HEALTH. IN THE LONG RUN, PREVENTIVE MEDICINE MUST BE OUR PRIMARY CONCERN.

PREVENTIVE MEDICINE HAS LED TO IMPROVEMENTS IN THE HEALTH STATUS OF AMERICAN CITIZENS IN RECENT YEARS. HOWEVER, OUR WORLD IS CHANGING RAPIDLY. WE ARE JUST BEGINNING TO RECOGNIZE THE PANDEMIC PROPORTIONS OF THE OCCUPATIONAL CANCERS AND LUNG DISEASES THAT ARE OCCURRING IN OUR MAJOR INDUSTRIES. WE ARE ALSO RECOGNIZING THE ENORMOUS COSTS OF OUR PAST PRACTICE OF IGNORING THE PUBLIC HEALTH DANGERS RESULTING FROM THE

CONTAMINATION OF OUR ENVIRONMENT. IF WE ARE TO SECURE FUTURE IMPROVEMENTS IN THE QUALITY OF LIFE AND HEALTH OF THE WORKING AMERICAN, WE MUST LOOK TO THE PUBLIC HEALTH POLICIES OF DISEASE PREVENTION, HEALTH PROMOTION AND IMPROVED CONTROL OF ENVIRONMENTAL AND OCCUPATIONAL CONTAMINANTS.

MR. CHAIRMAN, I HAVE SPENT OVER FORTY YEARS OF MY PROFESSIONAL LIFE IN THE FIELD OF PUBLIC HEALTH. I HAVE BEEN THE DIRECTOR OF COUNTY HEALTH DEPARTMENTS IN SEVERAL STATES AND HAVE SERVED THE U.S. PUBLIC HEALTH SERVICE IN A NUMBER OF POSITIONS INCLUDING THE INDUSTRIAL HYGIENE DIVISION, THE MIGRANT LABOR PROGRAM, THE WAR FOOD ADMINISTRATION AND REGIONAL MEDICAL OFFICER OF THE FARM SECURITY ADMINISTRATION. IN ADDITION, I SPENT TWENTY-ONE YEARS AS A MEDICAL OFFICER WITH THE UMWA HEALTH AND RETIREMENT FUND.

MY EXPERIENCE IN PUBLIC HEALTH HAS TAUGHT ME MANY THINGS, BUT THE MOST IMPORTANT LESSON I HAVE LEARNED IS THAT PREVENTIVE MEDICINE IS RELATIVELY INEXPENSIVE AND LIMITLESS IN ITS APPLICATION. CURATIVE MEDICINE, HOWEVER, IS TREMENDOUSLY EXPENSIVE AND QUITE LIMITED. IN ORDER TO REVERSE THE FRIGHTENING TREND OF OCCUPATIONAL DISEASES WE MUST HAVE A STRONG NATIONAL COMMITMENT TO PREVENTION. WE MUST HAVE A SURGEON GENERAL WHO IS NOT ONLY COMMITTED TO PUBLIC HEALTH AND PREVENTIVE MEDICINE, BUT WHO HAS EXTENSIVE TRAINING AND EXPERIENCE IN THE PUBLIC HEALTH DISCIPLINES. IF WE DO NOT MAKE THIS COMMITMENT THEN WE MUST

ACCEPT THE INEVITABILITY OF CONTINUED DEATH AND DISABILITY
AMONG OUR WORKERS AND OUR FELLOW CITIZENS. MR. CHAIRMAN,
WE URGE THE ADMINISTRATION AND THE CONGRESS TO MAKE THAT
COMMITMENT NOW SO THAT OUR CHILDREN AND GRANDCHILDREN MAY
LIVE OUT THEIR LIVES AS FULL AND USEFUL CITIZENS.